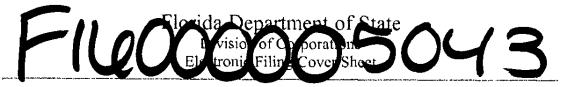
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H160002773723)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPCRATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## FOREIGN PROFIT/NONPROFIT CORPORATION AECOM INTERNATIONAL DEVELOPMENT, INC.

Certificate of Status	0
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## COVER LETTER

Division of Corporation	ns			
SUBJECT:	AECOM International Dev	relopment, Inc.		
)	Name of corporation - mu	st include suffix.		-
Dear Sir or Madam:		And the second of the second	and the second	
The enclosed "Application by F "Certificate of Existence," or "C above referenced foreign corpo	Certificate of Good Standing	" and check are submit	usiness in Florida," ted to register the	
Please return all correspondence	e concerning this matter to the	ne following:		
	Bethany Ware Purke	fr.		
	Name of Perso			<del>-</del>
	AECOM			
	Firm/Company			<del>-</del>
1994	Avenue of the Stars, Suite	<del></del>		
	Address			
•	Los Angeles, CA 900	67 ·	•	
F-m	City/State and Zi bethany.warepurketti ail address: (to be used for fi	@aecom.com	fication)	- -
L-III	an address, (to be asea 101 to	nuic annuar report non.	neation	
For further information concern	ning this matter, please call:			
			·	
,	at (			
Name of Person	Area Code	Daytime Telephon	e Number	
			And the second	•
		V.		
STREET/COURIER	ADDRESS:	MAILING ADD	RESS:	
Registration Section		: Registration Secti		·
Division of Corporation	ns	Division of Corpo	rations	·
Clifton Building		P.O. Box 6327		
Clifton Building 2661 Executive Center	Circle			
Clifton Building	Circle	P.O. Box 6327		
Clifton Building 2661 Executive Center	Circle	P.O. Box 6327		
Clifton Building 2661 Executive Center Tallahassee, FL 32301 Enclosed is a check for the follo	Circle owing amount:	P.O. Box 6327 Tallahassee, FL 3	2314	
Clifton Building 2661 Executive Center Tallahassee, FL 32301 Enclosed is a check for the follo	Circle  owing amount:  8.75 Filing Fee &   \$75	P.O. Box 6327 Tallahassee, FL 3	1 \$87.50 Filing Fec, Certificate of Statu	s &
Clifton Building 2661 Executive Center Tallahassee, FL 32301 Enclosed is a check for the follo	Circle  owing amount:  8.75 Filing Fee &   \$75	P.O. Box 6327 Tallahassee, FL 3	1 \$87.50 Filing Fec,	s &

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607. ISO3, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Entail norma of a	rporation; must include "INCORPORATED,"	I SEMAND APT A N. PAZ NI N. COMMENTANTANTA A PROJECT Y DE		
"Inc.," "Co.," "Co	orp," "Inc," "Co." or "Corp.")	"COMPANY," "CORPORATION,"		
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florid		
Delaware	3	20-0797043		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
February 24, 26	5.			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
June 1, 2016	June 1, 2016			
2101.30	·	502, F.S., to determine penalty liability)		
2101 W	(SEE SECTIONS 607.1501 & 607.1 Ison Blvd., Suite 700, Arlington, VA 22201			
2101 W	(SEE SECTIONS 607.1501 & 607.1 Ison Blvd., Suite 700, Arlington, VA 22201 (Princi	502, F.S., to determine penalty liability)		
	(SEE SECTIONS 607.1501 & 607.1 Ison Blvd., Suite 700, Arlington, VA 22201 (Princi	502, F.S., to determine penalty liability) pal office address) ng address, if different)		
	(SEE SECTIONS 607.1501 & 607.1 Ison Blvd., Suite 700, Arlington, VA 22201 (Princi	502, F.S., to determine penalty liability) pal office address) ng address, if different)		
Name and stree	(SEE SECTIONS 607.1501 & 607.1 Ison Blvd., Suite 700, Arlington, VA 22201  (Principal Courrent mail) et address of Florida registered agent: (P.0)	502, F.S., to determine penalty liability) pal office address) ng address, if different)		
Name and stree Name:	(SEE SECTIONS 607.1501 & 607.1 Ison Blvd., Suite 700, Arlington, VA 22201  (Principal Courrent mail)  et address of Florida registered agent: (P. C T Corporation System	502, F.S., to determine penalty liability) pal office address) ng address, if different)		

## 9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

> C T Corporation System Triston Emrich Assistant Secretary (Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

A. DIRI	ECTORS		
Chairman			
Address:			
Vice Chai	Torge Geriach		
Address:	2101 Wilson Blvd., Suite 700		
	Arlington, VA 22201		
Director:	John Völlmer		
Address:	2101 Wilson Blvd. Suite 700		
	Arlington, VA 22201		
Director:	Jeffrey Parsons		
Address:	2101 Wilson Blvd., Suite 700		
	Arlington, VA 22201		
B. OFF	Torge Gerlach		
Address:	2101 Wilson Blvd., Suite 700	<u> </u>	
	Arlington, VA 22201	<u> </u>	
Vice Pres	ident:		
Address;		<u> </u>	
		<u> </u>	
Secretary		~	· · · :
Address:	ALTA		
Treasurer	Dick Witsil Shik LAD		
Address:	20501 SENECA MEADONS PKWY #300, GERMANTOWN, MD 20876		
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or dire	ctors.	
12.			
are true i	Signature of Director or Officer fer or director signing this document (and who is listed in number 11 above) affirms that the facts and that he or she is aware that false information submitted in a document to the Department of Stategree felony as provided for in s.817.155, F.S.		
13	Dick Witsil, Chief Financial Officer		
	(Typed or printed name and capacity of person signing application)		



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AECOM INTERNATIONAL DEVELOPMENT, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF NOVEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

You may verify this certificate online at corp.delaware.gov/authver.shtml

3768615 8300

SR# 20166566523

Authentication: 203307298

Date: 11-09-16